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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	<b>10/582,824</b>
	Filing Date	<b>June 14, 2006</b>
	First Named Inventor	<b>Diane Dromgold</b>
	Art Unit	
	Examiner Name	<b>Unknown</b>
Attorney Docket Number	<b>17804US</b>	

**I hereby revoke all previous powers of attorney given in the above-identified application:** A Power of Attorney is submitted herewith.**OR** I hereby appoint the practitioners associated with the Customer Number: **23676** Please change the correspondence address for the above-identified application to: The address associated with Customer Number: **23676****OR**

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I am the:

Applicant/Inventor.  
 Assignee of record of the entire interest. See 37 CFR 3.71  
*Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Signature					
Name	<b>Diane J. Dromgold</b>				
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

 \*Total of **2** forms are submitted.

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